Copy for information and necessary action to :—

1. Dr. B.P. Mishra, C.M.O. I/c., CGHS Disp. Gole Market, New Delhi.
2. Dr. B.C. Roy, Homoeo. Unit, Dev Nagar New Delhi.
3. Vaid R.J. Agnihotri, CGHS Ayur. Hosp., Lodi Road, New Delhi.
4. Dr. (Mrs.) Santosh Arora, CGHS Ayur. Disp., R.K. Puram, New Delhi.

} Except for two days in a week as indicated above they will attend their respective place of posting on rest of the four days of the week.

Sd/-

Dr. S. K. Sinha)

Additional Director (CGHS)

Manitole Injections

880. SHRI ISH DUTT YADAV : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether Government are aware that inspite of several defects 350 Ml. Manitole injections are being sold at several Medical Stores in Kanpur, Uttar Pradesh which gives the surity of Human death as appeared in Dainik Jagaran dated 5th February, 1992 ; and

(b) if so, what action has been taken in this regard ?

THE MINISTER OF HUMAN RESOURCE DEVELOPMENT (SHRI ARJUN SINGH) : (a) and (b) As per the information available, the drug control department of the Government of Uttar Pradesh had inspected the premises of M/s Rajiv Agencies and M/s Paras Ram Deepchand, Kanpur, Uttar Pradesh and took some samples of Injection Mannital 20% USP manufactured by Shri Krishna Keshav Lab. Ltd., Ahmedabad for testing. All the samples have been reported to be of standard quality by the Government Analyst, Uttar Pradesh.

Facilities to the Poor

881. KUMARI ALIA : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) what medical facilities are being provided to the poor people in Government hospitals ; and

(b) what criteria has been fixed for this purpose ?

THE MINISTER OF HUMAN RESOURCE DEVELOPMENT (SHRI ARJUN SINGH) : (a) and (b) The indoor patients in General Wards of the Central Government Hospitals are provided drugs/medcines, diet and investigations free of cost. In addition, outdoor poor patients are also provided certain medical facilities free of cost.

Budgetary Provisions for Health and Family Welfare

882. SHRI KAMAL MORARKA : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) what is the budgetary provision for Health and Family Welfare for 1992-93 vis-a-vis that in 1991-92 ;

(b) the share of expenditure on health and family welfare of total Central Budget in the above years ; and

(c) the per-capita expenditure on health in India as compared to various Asian countries ?

THE MINISTER OF HUMAN RESOURCE DEVELOPMENT (SHRI ARJUN SINGH) : (a) and (b) The allocations for central budget as well as for Central

Sector Health and Family Welfare are asunder :—

	Total Central Sector (Plan Outlay)	Central Sector Health Programme (Plan Outlay)	Family Welfare (Plan Outlay)	Total Central Sector Health & F.W. (Plan Outlay)	Share of Expenditure
1991-92	42968.75	301.90	749.00	1050.90	2.4%
1992-93	48407.08	302.00	1000.00	1302.00	2.7%

(c) A Statement showing the comparison per-capita expenditure on Health in India and other countries is enclosed herewith.

Statement

GOVERNMENT HEALTH EXPENDITURE IN DIFFERENT COUNTRIES

Sl. No.	Name of the Country	Percentage of Govt. Health Expenditure to Total Govt. Expenditure			
		1983	1984	1985	1986
1	2	3	4	5	6
	World	9.68	10.22	10.38	†
A.	Industrial Countries	11.39	12.03	12.28	†
	United States E%	10.65	11.04	11.29	11.55
	Canada G	6.27	6.34	6.09	†
	Australia C*	7.12	7.85	9.54P	9.52
	Japan	—	—	—	†
	France C	14.50	—	—	†
	Germany D	18.64	18.74 P	—	†
	United Kingdom C	13.22	12.87	12.55	†
B.	Memorandum Items				
	(*i*) Oil Exporting Ctys	4.92	5.30	5.56	†
	(*ii*) New Oil Developing Ctys	3.79	3.94	3.69	†
C.	Developing Countries	4.00	4.20	4.06	†
	(*i*) Africa	—	—	—	†
	Ghana	—	8.58	9.80	8.28
	Kenya A*	6.96	6.73	6.43	†
	Mauritius*	7.84	8.10	7.56	7.71
	Sudan A	—	—	—	†

Statement—contd.

1	2	3	4	5	6
(*ii*)	Asia	3.05	3.07	3.14	2.87
	Bangladesh*	4.09P	6.24P	—	†
	Burma A‡‡	6.87	7.35	7.71	†
	India E‡‡	2.42	2.28	2.16P	2.09P
	Indonesia‡‡	2.21	2.54	2.50	1.87
	Malaysia	—	—	—	†
	Nepal†	4.65	4.39	4.97	†
	Pakistan D*	1.04	1.10	1.00	†
	Philipines A	5.48	5.02	5.95P	†
	Srilanka A	5.22	3.73	3.77	4.04P
	Thailand B%	5.01	5.43	5.69	†
(*iii*)	Europe	—	—	—	†
	Yugoslavia G	—	—		†
(*iv*)	Middle East	5.23	5.73	6.13	†
	Egypt A*	2.84	2.60	2.60	2.39P
(*v*)	Western Hemisphere	4.58	4 85	4.33	†
	Argentina	1.37	1.81	1.28	†
	Brazil D	7.09	7.37	6.42	†
	Mexico C	1.20	1.52	1.38	†

NOTE : Letters A—G following country name indicate percentage of Central Government Tax Revenue Accounted for by the Central Government for the Latest Year with Data Available, as follows A, 95 and over : B, 90-94. 9 : C, 80-89.9 D, 70-79.9; E, 60-69.9; F, 50-59.9 and G, 20-24.9.

Symbol* Indicates break in continuity of time series as described in country notes on coverage of data most recent fiscal years, other than those ending December, 31, as

Indicated as‡‡ beginning April 1; *, ending June 30; % ending Sept 30; & † other the letter P indicates that data are in whole or in part provisional preliminary, or projected.

Source : Government finance stastitics year book 1986, volume X, international monetary Fund, Page No. 54 & 55.

Roots of Medicines in Basic Drugs

@883. SHRI MURLIDHAR CHANDRAKANT BHANDARE : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether Government are aware that over 60,000 brands of medicines and formulations have their roots in barely 700 basic drugs ; and

(b) if so, what steps have been taken and are being taken to rationalise the medicines and formulations to protect the consumer against exploitation by unscrupulous drug manufacturers who produce admixtures of various drugs and formulations, without research background in the name of new medicines ?

THE MINISTER OF HUMAN RESOURCE DEVELOPMENT (SHRI ARJUN SINGH) : (a) The licence to manufacture drugs/formulations are granted by the licensing authorities appointed by the State Governments in their respective States. The exact number of formulations, including different brands, different dosage forms, different packaging of the same drug is, therefore, not available with the Central Government.

@Previously Unstarred Question 371 transferred from the 30th April, 1992.